## ONE HUNDRED PERCENT (100 %) DISABLED VETERAN APPLICATION FOR BIRD, FISH AND SMALL GAME LICENSE

## ALL PERSONAL INFORMATION REQUESTED ON THIS FORM IS REQUIRED

FOR OFFICE USE ONLY
LICENSE #
DATE ISSUED
ISSUED BY

Date of Application \_\_\_\_\_

I,/		Weight	Sex
Last Name	First Name & Initial	Eyes	Hair
		Height: Feet	Inches
		Date of Birth	Age
Street Address or Box Number /WYOMING/		Social Security Number XXX-XX-	
		(Last 4 digits required)	
		Years of Residency	
		Daytime Phone Number	
City	ZIP Code		
claimed residency elsewhere for any purpose	a United States citizen and have been a resident of Verbard that one (1) year period immediately precedinately prior to the date of this application, and that all	ng the date of this application or that I	am an alien and have resided continuously

## LICENSE REOUIREMENTS

Applicant's Signature

To be eligible for a one hundred percent (100%) Disabled Veteran Bird, Fish and Small Game License you must be a resident of Wyoming and have a letter from the respective Veterans Administration Office certifying to the 100% level of disability of the applicant. The letter shall be signed by the Veterans Service Center Manager. The one hundred percent (100%) Disabled Veteran Bird, Fish and Small Game License is valid as long as the license holder remains a Wyoming resident.

NO LICENSE WILL BE ISSUED WITHOUT THIS APPLICATION AND RESPECTIVE CERTIFICATION LETTER.

One hundred percent (100%) Disabled Veteran Bird, Fish and Small Game licenses are issued only at Wyoming Game and Fish Department Regional Offices located in JACKSON, PINEDALE, CODY, SHERIDAN, GREEN RIVER, LARAMIE, LANDER, CASPER or at Headquarters in CHEYENNE. Applications can be mailed to: Wyoming Game and Fish Department, License Section, 5400 Bishop Boulevard, Cheyenne WY 82006-0001.

Revised 3/2012